

COMMUNICATIONS WORKERS' UNION
575 North Circular Road, Dublin 1

To: All Scale B Branches who have nominated Delegates to attend the 11th Biennial Conference 2022

Re: 11th Biennial Conference 2022

Dear Colleague,

The 11th Biennial Conference will be held on 4th & 5th May 2022 at the Sheraton Hotel, Athlone.

National Executive Report: A copy of the National Executive Report/Conference Agenda will be forwarded to all Delegates on or about **Thursday 14th April 2022**.

Credentials: The Standing Orders Committee will supply Delegates with the Credential/Identification Badges. Delegates will not be allowed into Conference without these. The Standing Orders Committee will be in attendance between 6:00 p.m. – 8:00 p.m. preceding Conference in the Sheraton Hotel, Athlone on **Tuesday 3rd May 2022**.

Delegate Expenses: An Expense Claim Form is herewith enclosed. This Form should be completed (stating name, staff number and postal address) and returned to Head Office not later than **Friday 4th March 2022**.

Note: Expense Claim Forms received after the date above will not be paid out until after Conference.

So as to minimise the difficulties for Head Office in organising Conference, Delegates are asked to note carefully the contents of this Circular and to adhere to the dates and procedures outlined therein.

Thanking you in anticipation of your whole-hearted cooperation.

Yours fraternally,



Seán McDonagh
General Secretary

COMMUNICATIONS WORKERS' UNION

11th BIENNIAL CONFERENCE 2022 – Sheraton Hotel, Athlone 4th & 5th May 2022.

In connection with payment of your expenses for attendance at Conference, please complete and return this form to Head Office to reach us as soon as possible but not later than **Friday 4th March 2022**. *The Executive appeals to Delegates to keep cost of substitution expenses to a minimum.*

Arrangements should be made locally for special leave to attend Conference. The cost of the special leave will not be deducted from your pay. The Company will furnish the details later to your Branch for payment. Therefore, Delegates are requested to take the minimum amount of leave necessary.

EXPENSE CLAIM FORM

Meals and Expenses: _____ € _____
(to be filled in by Head Office) (State Number of Days)

Rail/Bus Fare from / _____

To Athlone (return) _____ € _____

TOTAL €=====

CONFERENCE EXPENSES WILL BE PAID BY ELECTRONIC FUND TRANSFER ONLY**BANK DETAILS:**

NAME OF BANK: _____ **PLEASE PRINT**

NAME ON ACCOUNT: _____ **PLEASE PRINT**

IBAN:

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ACCOUNT NO: _____ **SORT CODE:** _____

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Official Name: _____

Address: _____

Telephone No: _____

Staff No.: _____

NB: Please insert staff number to avoid delay with payment

Branch: _____

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DATA PROTECTION:

The information collected here will only be used for the purpose of processing your claim for Biennial Conference expenses and will not be shared with any third-party. If you consent to the use of your data for this purpose, please sign the form below.

DELEGATE SIGNATURE: _____ **DATE:** _____